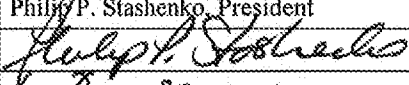


# AGG INTELLECTUAL PROPERTY LAW

<b>POWER OF ATTORNEY OR AUTHORIZATION OF AGENT AND CORRESPONDENCE ADDRESS</b>	Application Number	10/783,519
	Filing Date	February 20, 2004
	First Named Inventor	Philip Stashenko et al.
	Confirmation Number	2668
	Group Art Unit	1646
	Examiner Name	HOWARD, ZACHARY C
	Attorney Docket Number	0024.0035-019
<b>Title</b> Osteoclast Proton Pump Subunit		
I hereby revoke all previous powers of attorney given in the above-identified application.		
I/We hereby appoint <input type="checkbox"/> the attorneys/agents associated with <input checked="" type="checkbox"/> Practitioner(s) named below: Antoinette G. Giugliano, Esq. (Registration No.: 42.582)		
as my/our attorneys/agents to prosecute the application identified above, including any continuation or divisional applications thereof, and to transact all business in the United States Patent and Trademark Office connected therewith.		
The correspondence address for the above-identified application is: <input checked="" type="checkbox"/> Customer No.: <b>42,842</b> , which is associated with the following address: Antoinette G. Giugliano, P.C. DBA AGG Intellectual Property Law 100 Cummings Center, Suite 213C Beverly, Massachusetts 01915 <input type="checkbox"/> Other _____		
Please direct all telephone calls and facsimiles to: Name <u>Antoinette G. Giugliano</u> Tel. No. <u>978-927-7377</u> Fax No. <u>978-927-7477</u>		
I am the: <input type="checkbox"/> Applicant/Inventor.  <input checked="" type="checkbox"/> Authorized representative of the Assignee, <b>Forsyth Dental Infirmary for Children</b> , of the entire interest. See 37 C.F.R. § 3.71. A Statement under 37 C.F.R. § 3.73(b) is enclosed.  <input type="checkbox"/> Authorized representative of the Assignee, [ ], together with [ ], of the entire interest. A Statement under 37 C.F.R. § 3.73(b) is enclosed.		
<b>SIGNATURE of Applicant or Assignee of Record</b>		
Name & Title	Philip P. Stashenko, President	
Signature		
Date	Dec 20, 2011	